120.00 DA

01 FC:1251

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)			Docket Number (Optional) 21751-002400US	
FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)				
Application Number 09/750,100			Filed December 29, 2000	
CONTROLLA	ERTIAL FIELD GENERATOR: A METHOL ABLY COUPLING KINEMATIC CHARACTI LY SIMULATED ELEMENTS			
Art Unit 2123			Examiner THOMAS H. STEVENS	
This is a requapplication.	uest under the provisions of 37 CFR 1.136(a) to extend the per	riod for filing a reply in	the above identified
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):				
		<u>Fee</u>	Small Entity Fee	!
\boxtimes	One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ <u>120</u>
	Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$
	Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$
	Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$
	Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$
Applicant claims small entity status. See 37 CFR 1.27.				
A check in the amount of the fee is enclosed.				
Payment by credit card. Form PTO-2038 is attached.				
The Director has already been authorized to charge fees in this application to a Deposit Account.				
Depos		I have end	closed a duplicate cop	y of this sheet.
WARNI Provide	NG: Information on this form may become publice credit card information and authorization on P	c. Credit card information of the control of the co	ation should not be inclu	ided on this form.
I am the	applicant/inventor.			
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).				
attorney or agent of record. Registration Number 43,336				
attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34				
S.B. Kotwal			March 8, 2005	
Signature			Date	
	Sujit B. Kotwal, Reg. No. 43,336 Typed or printed name		650-326-2400 Telephone Number	
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	es of all the inventors or assignees of record of the entil required, see below.	e interest or their represe	entative(s) are required. Sut	omit multiple forms if more than
Total of	1 forms are su	hmittad		